



THE EXAMINER



Robert E. Bush Naval Hospital, Twentynine Palms, California

Volume 11, No. 1

"Serving with Pride and Professionalism"

January 2003

Naval Hospital Takes Proactive Approach With Health Promotions

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

All beneficiaries of the Robert E. Bush Naval Hospital enjoy a complete multi-media health promotion and health education program.

Over the past two years, Martha Hunt, Health Promotions Coordinator for the hospital, in collaboration with the hospital's Public Affairs Office, has developed a health promotion program designed to fit the unique needs of the beneficiaries located at the Marine Corps Air Ground Combat Center (MCAGCC) in Twentynine Palms, Calif.

Hunt developed a display of all poisonous and non-poisonous (yet scary looking) critters that may be found in the Mojave Desert. With the onset of military operations in Afghanistan, she researched and provided information on dangerous insects and snakes located in central Asia. The hospital lobby display of local critters became so popular with visitors, that the community library in the City of Twentynine Palms also requested a copy of the display.

In addition, Hunt has produced or published hundreds of handouts and informational pamphlets on a wide array of topics from disease prevention and home safety, to stress and support group information that anyone who lives and works in the arid California desert will find this information valuable. Also, Hunt developed and published a well-received Community Resource Directory for the staff and beneficiaries of the hospital. The Community Resource Directory has all local, state and federal health and social service resources that are available to the public. The

Please see **HEALTH** on page 7

Congressional Staffer Visits...



Ms. Sarah Young, a Congressional Staff Delegate from the House Appropriations Committee recently visited the Naval Hospital's new construction of the LDRP suite.

Highlights...

Tobacco use by pregnant women can cause a wide variety of problems in pregnancy including double the risk of ectopic or tubal pregnancy, 80 percent higher risk of miscarriage, higher rates of preterm labor and early rupture of membranes, and lower birth weight babies. *See page 2*

Let me take this opportunity to introduce myself. My name is Monica Shaw, and I have been appointed as Ombudsman for this command. *See page 3*

More than 400,000 military pharmacy mail order customers will be switched March 1, 2003, to a new TRICARE Mail Order Pharmacy program, according to Army Col. William D. Davies of the TRICARE Management Activity, Falls Church, Va. *See page 5*

The Examiner can now be viewed online at: www.nhnp.med.navy.mil

We Need You!!

To become a member of our
"Family-Centered" Maternity Care Advisory Board

The Robert E. Bush Naval Hospital Maternity Service and Children's Health programs are undergoing changes to become more "family centered."

The staff wants to design care to meet your needs. To make this happen, an Advisory Board is beginning and you are invited to become a member.

Speak Up! You can make a difference in the health care services you receive by working with Doctors, Nurses and Hospital Staff members on this Council. Your experiences and ideas are important to the success of this special program, so please think about joining.

If you have become a parent (mom or dad) in the last three years or are currently pregnant and have an interest in helping the hospital become more "family centered," please call Lt. Cmdr. Meggan McGraw at 830-2259, or send an e-mail to m.mcgraw@nhnp.med.navy.mil.

Your participation may involve attending a once a month meeting at the hospital with other parents and hospital staff members.

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Here's to Your Health...

Tobacco and Pregnancy, What are the Risks to your Baby?

By Martha Hunt, MA, Health Promotions Coordinator
Robert E. Bush Naval Hospital

Tobacco use by pregnant women can cause a wide variety of problems in pregnancy including double the risk of ectopic or tubal pregnancy, 80 percent higher risk of miscarriage, higher rates of preterm labor and early rupture of membranes, and lower birth weight babies.

Tobacco use by either parent can increase the chance that the couple will be infertile. Women who smoke have fewer egg cells and men who smoke have fewer sperm, abnormal sperm, slow sperm and suffer from higher rates of impotency.

There are over 4,000 chemicals in tobacco and over 50 of these chemicals are known to either cause cancer or to damage the DNA in your body. DNA is the genetic information carried in your cells that gives you brown eyes, make you tall or short, or any other inherited trait that is passed on from parent to child. The damage done to eggs and sperm by these chemicals can lead to increased rates of SIDS, birth defects, miscarriage and childhood cancers.

While nicotine may be out of your body in three days, the DNA damage done to the sperm and egg cells lasts forever. Once an error has occurred in the genes, it's like a photocopy of the damage in that the new copies of the cells carry the same damage over and over.

Military Deploys Digitized Patient Record System

By Gerry J. Gilmore
American Forces Press Service

WASHINGTON, Dec. 19, 2002 — A computerized system will eventually provide military physicians with fast, around-the-clock access to patient records anywhere in the world, a DoD health care official noted.

The Composite Health Care System II, a digitized, networked patient record system, has been green-lighted for deployment to serve the military health care system's 8.7 million beneficiaries, Navy Dr. (Cmdr.) Robert Wah said. The recently approved system, he remarked, is slated to debut at up to seven military hospitals within the next year.

"We will gather lessons learned and then we plan to go worldwide over the next three-year period," he explained. Global implementation of CHCS II could take up to five years, Wah noted.

Availability of CHCS II will provide a "data gold mine" for military physicians and other health care professionals, he said. "We can use powerful computers to go in and 'mine' information to help us take better care of our patients," he explained.

Additionally, the database can provide "symptom surveillance," he said. That means it could reveal where "a set of symptoms may be coming through our system (and could) alert us earlier to a possible epidemic or even a biological or chemical attack," he continued.

That's something a single person can't discern using low-tech paper records and patient health charts, he said. Paper charts are a storehouse for information on a single patient, Wah explained, but to provide an overall picture of the health of hundreds, thousands or in the DoD case, millions of patients, we need more than rooms full of patients paper charts.

"We can have the computer constantly watching that 'data gold mine,' to see when things may be cropping up," he noted.

Wah said other CHCS II benefits include enhanced patient safety — physicians' reports and notes are 100 percent legible and there are no transcription errors.

Using computers in the medical field has proven to be a more accurate, efficient way of doing business, Wah remarked. In the military, for example, the old, sometimes difficult to read, pharmacy prescription slip is a thing of the past, he asserted.

"Military physicians order all medications on computers today," he said. "We've been able to do that for 10 years now." He pointed out that most doctors in the civilian world still fill out paper prescription slips.

Computerized databases also provide more accurate record keeping for service members being immunized with the smallpox vaccine, Wah said, noting that such methods can quickly identify who was immunized by a particular vaccine batch or lot.

"If there ever is a problem, we can determine who got a shot from a particular vial, much more quickly than a paper (record keeping) system," he pointed out.

With a paper system, flipping through the pages of medical records to find out just one patient's vaccine information would be very time-consuming, Wah explained.

"Now, because it's all on a computer storehouse, we can have the computer do all of that searching for us," he concluded.

CHCS II is more than just a 'database' it is a complete suite or system.

Tobacco use - both by the pregnant woman and as second hand smoke - is one of the leading causes of Sudden Infant Death Syndrome. If tobacco use were eliminated as a cause, it would decrease the number of SID's deaths in the United States by at least 1/3 every year. There are 2,300 SID's deaths every year that are due to second hand tobacco smoke alone.

Women who use tobacco while they are pregnant put their babies at risk of cleft lip and palate, higher rates of aggressive behavior as they grow up, and higher rates of learning disabilities and autism. Kids of women who used tobacco while pregnant also have higher rates of asthma and other lung diseases and higher rates of adult onset diabetes and obesity. Not only is the baby exposed to tobacco while the mom is pregnant, but nicotine crosses into breast milk and the baby drinks nicotine in mom's breast milk. Tobacco use by the mom also reduces the amount of milk that she is able to produce for her baby. If you smoke anywhere around your child once they are born - you are causing asthma, allergies, bronchitis, cancer, heart disease, lung disease, pneumonia, sinusitis, colic, meningitis, and tooth decay. Second hand smoke in the home is the leading reason why health care providers see children under the age of 18 months. There are over 300,000 hospital admissions every year in the United States for kids less than 18 months due to respiratory and ear infections because the parents smoke in the home or around their kids. Also, there are 1,500 children killed in the United States by fires started by adults who are careless with matches or cigarettes.

The Health Promotions program in the hospital offers tobacco cessation classes on a monthly basis. If you smoke or dip you can get help quitting. Call 830-2814 for more information. Don't let your baby start life under a cloud of smoke.

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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Fleet Hospital Support Unveils New Mobile Medical Facility

From Fleet Hospital Support Office Williamsburg Public Affairs

WILLIAMSBURG, Va. (NNS) — The Fleet Hospital Support Office (FHSO) in Williamsburg dedicated its newest design of mobile medical facility that will help make Navy Medicine even more flexible in its response to terrorism.

The Expeditionary Surgical Unit (ESU) Alpha was conceptualized in February 2002 in response to the terror attacks of Sept. 11, 2001.

The ESU facility utilizes organic assets from a 500-bed fleet hospital and consolidates them into a one operating room, 10 ICU (intensive care unit) bed, non-shelter-based trauma surgical facility, including ancillary support such as laboratory, pharmacy, central sterile supply and radiology. To make the ESU easy to move by aircraft, it's constructed around a new tent system, known as BASE-X, which is about 50 percent lighter than the tents now in use.

"The whole point of the unit is to make it possible for Navy Medicine to respond quicker, with more flexibility, to the needs of the fleet and the Marines," said Cmdr. Benjamin Liam, FHSO's executive officer.

Introducing the Hospital's Command Ombudsman

Let me take this opportunity to introduce myself. My name is Monica Shaw, and I have been appointed as Ombudsman for this command.

My husband and I have been married for nine years and we have two children. We have been stationed on both coasts and in Japan.

As many of you probably already know, ombudsmen are here to assist Navy families. We act as a liaison between the command and the families, and we communicate information about command and community resources to families.

I am aware of the dedication and success that the program has seen with our past Ombudsman Donna Drumsta. I want to continue this success, yet see it reach new heights. Of course no program can be suc-

cessful without support from both families and command.

We have started a Family Support Network (FSN), which is made up of both civilian and Navy spouses. You may be more aware of their efforts from the wonderful Easter Egg Hunt we had this year. We're hoping more spouses come forward to be part of this great program, so we may continue to have more events for our families.

I am looking forward to meeting you and getting together to make Twentynine Palms a great place for the time we are all here. Please feel free to reach me at home by calling 361-9474 or paging me at 1-800-459-0827. Your questions, comments, complaints, concerns, etc. will be held in the strictest confidence.



Monica Shaw, Ombudsman

Patient Safety...

Our Commitment Grows in 2003

By Lt. Daniel Anthony, NC
Multi-Service Ward

2002 was a great year for the Patient Safety Program here at Naval Hospital, 29 Palms. Late last summer, the Risk Management Advisory Committee (RMAC) looked at patient safety needs and set a list of priorities upon which the RMAC team could take a pro-active stance and tackle big items (such as the medication inventory) with the goal of preventing future errors.

Currently, the team is reviewing the patient-controlled analgesic (PCA) delivery system using the newly adopted Failure Mode and Effect Analysis (FMEA) guidelines. The PCA delivery system is a form of providing pain control for in-patients that gives the patient control over the amount and timing of strong pain medicines such as morphine. With this delivery system growing in popularity (based on positive patient outcomes), the potential for errors also grows.

Using FMEA, the entire process of PCA protocol is under review. From the doctor's order, to the pharmacy and in-patient wards, the team is reviewing each step in the pathway leading to the final action of a patient pressing a delivery button for more medicine through an intravenous access port.

Failure mode analysis, however, is not a new concept. Back in the 1960s, the aerospace industry used this model to detect problems before they occurred. More recently, the Veteran's Administration National Center for Patient Safety adopted a

version of the industry's model tailoring it more to healthcare organizations. Today, most hospitals are incorporating aspects of FMEA into their risk management/patient safety agendas.

Naval Hospital, 29 Palms want to lead the way locally to ensure that our beneficiaries here in the desert receive the same attention and concern as those in larger institutions

whenever patient safety concerns arise. Our focus on the patient-controlled analgesic delivery system is the first of many processes to be reviewed using guidelines developed from FMEA. As always, our commitment to patient safety remains at the forefront of the healthcare we provide, and together, we can make 2003 the best and safest year for all of us here in 29 Palms

Upcoming Diabetes Class Schedule

The Internal Medicine Clinic of the Robert E. Bush Naval Hospital offers a series of "Diabetes Self-Management Classes."

The schedule of classes is as follows:

Acute & Long-Term Diabetes Complications. Thursday, Jan. 16.

Controlling Your Cholesterol. Thursday, Feb. 20.

Alternative Medicine Therapies (Vitamins, Herbs, Diet Supplements) & Diabetes. Thursday, Mar. 20.

Oral Diabetes Medicines. Thursday, April 17.

Exercising to Improve Diabetes. Thursday, May 22.

Taking Care of Your Feet. Thursday, June 19.

All classes are held in the Family Practice Clinic Classroom 3.

Anyone with diabetes or interested in learning more about diabetes is welcome to attend.

For more information call Lt. Julie Lundstad at 830-2067.

Life's Lesson...

You're getting old when things you buy don't wear out.

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- *Back to Work

LOCATION, DATE & TIME:

Naval Hospital Twentynine Palms
Classroom 3 (behind Family Practice Clinic)
Every Monday 10 a.m. -noon
Breast Education Center 830-2501

Hard Chargers...



Above, Santa paid a visit to the hospital last month to recruit some Christmas Carolers for a singing tour to entertain patients and staff.



Left, newly promoted Lt. Cmdr. Sharleen Romer, of the Sugical Suite, takes the oath at her ceremony.

Right, HMC Asner Dizon, of Human Resources, receives Special Region 9 Recognition from Capt. Lynda A. Salmond, Commanding Officer, Robert E. Bush Naval Hospital.



Above, Ensign Tammie Canton, Legal Officer, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Above, Lt. Cmdr. Thri receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Above, HN Gregory Hogue, Laborator, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.

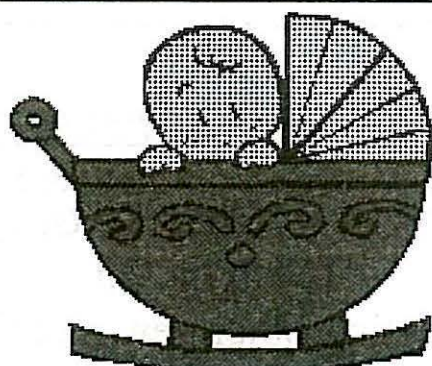


Left, Lt. George Hurtt, Occupational 1 receives Special Region 9 Recognition from Capt. Salmond.



Left, MS3 Gary Leshner, BEQ Staff, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.

Right, MS1 Cesar Caldejon, B receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



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Time: 12:30 to 2 p.m.

Group leaders: Beverly Dexter, PhD 830-2935

Janet Hamilton, MSW 830-2584



ell, OB Clinic,
Corps Commendation



Above, Lt. James Hagen, Clinical Services, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Left, MS2 Christopher Angelozzi, BEQ Staff, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Above, MS1 Jessie Angeles, BEQ Staff, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Left, MS2 Ritchie Fogata, BEQ Staff, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.

Right, MS2 Kimberly White, BEQ Staff, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Above, HM3 Maria Kaufman, Multi-Service Ward, receives her Honorary Desert Rat Certificate from Capt. Salmond.



Left, Lt. j.g. Stacie Milavec, Laboratory, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



For More Hard Chargers see page 8

New TRICARE Mail Order Pharmacy to Open March 1, 2003

By Rudi Williams, American Forces Press Service

WASHINGTON (NNS) — More than 400,000 military pharmacy mail order customers will be switched March 1, 2003, to a new TRICARE Mail Order Pharmacy program, according to Army Col. William D. Davies of the TRICARE Management Activity, Falls Church, Va.

Services will continue under the National Mail Order Pharmacy contract until Feb. 28, 2003, he noted. The next day, March 1, Express Scripts Inc. will provide services under the new TRICARE Mail Order Pharmacy program, Davies said.

Express Scripts Inc. of Maryland Heights, Mo., won the \$275 million, five-year contract in September to provide mail order pharmacy services for TRICARE beneficiaries.

The director of DoD pharmacy programs, Davies said beneficiaries who have refills remaining on prescriptions on March 1 will be transferred to Express Scripts so they can continue ordering medications on time, with a few exceptions.

"We can't transfer narcotics or other controlled substance prescriptions, nor can we transfer compounded prescriptions - those that are physically prepared by the pharmacy," said Davies, a registered pharmacist with more than 23 years of active-duty service.

Medication that requires refrigeration is shipped through priority mail or a courier service, the pharmacist said. "That's one reason we don't send medications that require refrigeration to APO and FPO addresses overseas," he noted.

TRICARE beneficiaries living and working overseas can use the mail order pharmacy if they have an APO, FPO or a U.S. embassy address, but a provider licensed to practice in the United States must write the prescription.

In early January, current users should receive a post card announcing the new services. A mailing that will include a registration form, a description of benefits and a brochure covering the TRICARE program will follow.

Those eligible to use the current mail order program or the retail benefit are eligible to use the new TRICARE mail order program. New customers have to register for the program. Information will be provided through the TRICARE service centers, military treatment facilities pharmacy, as well as their marketing points of contact.

The usual delivery time for medication is five to seven days. The easiest way for patients to ensure they don't run out of their medication is to have the provider write for up to a 90-day supply with up to three refills. The beneficiary can request a refill once 75 percent of the medication has been used.

"So about day 70 into their medication, they can request a refill," Davies said. "That provides them a cushion."

He said all medication is screened for potential drug interactions or therapeutic overlaps that could produce an adverse drug reaction. He said patients' complete beneficiary profiles are entered into the Pharmacy Data Transition Service, which enhances patient safety

by keeping their medication records current, on file and readily available.

The new contract saves taxpayers' dollars because it calls for purchasing drug products at federal prices. Best federal prices are at least 24 percent below average commercial wholesale prices Davies estimated.

The TRICARE Management Activity will manage the new contract. The current, national contract has been managed by the Defense Logistics Agency's Defense Supply Center in Philadelphia.

Patients can fill prescriptions three ways: by direct care at military treatment facilities, the retail pharmacy network or the mail order program, Davies noted. The direct care system serves the bulk of the beneficiary population, he said. About 2.5 million beneficiaries use the retail pharmacy network because they don't have access to a military facility.

Most of the 400,000 beneficiaries who use the mail order program do so for chronic medication or maintenance medication needs, Davies said.

"We want beneficiaries who have long-term medication needs to consider using the mail order program. It provides up to a 90-day supply of most medications for a single co-pay, whereas they only receive a 30-day supply for a single co-pay in the retail network pharmacy system," he said.

Under the TRICARE Mail Order Pharmacy system, the co-pay for up to a 90-day supply for most medications is \$9 for branded products or \$3 for generics. Exceptions include controlled substances, and active-duty members pay no co-pays.

For more information, including a complete section on the co-pay structure, visit the TRICARE Web site at www.tricare.osd.mil. Reservists can check the site for details of their benefits under the program.



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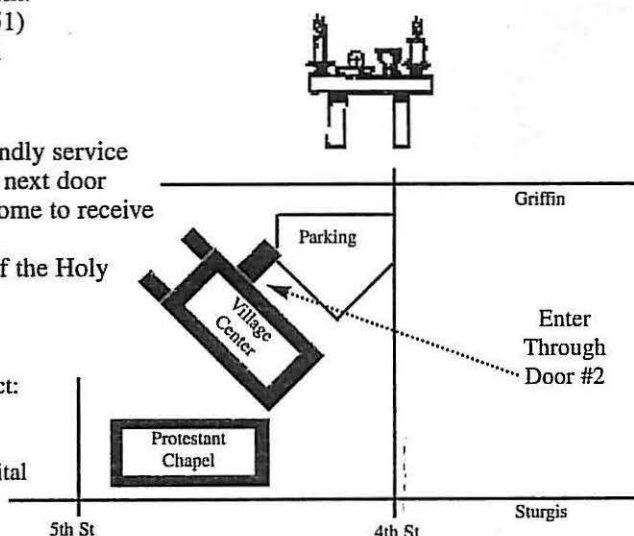
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HEALTH...

Continued from page 1

directory includes a listing of toll free health information numbers, support groups and all military health web sites, including overseas stations.

Tobacco users at MCAGCC have the opportunity to attend Hunt's monthly Tobacco Cessation Classes. Classes are offered each Tuesday at the hospital, either during the lunch hour or after work. Since Hunt has conducted this class, she has seen more than 200 people complete the program out of 343 initially signing up. "Of those people I can track at six months, at least 50 percent of them have given up tobacco use," said Hunt.

Each month Hunt also writes a "Here's To Your Health" column for the hospital's newspaper, "The Examiner," and in keeping with her 'critters of the desert' information program, she provides a monthly "Critic de jour" column. Examiner articles have covered a wide array of topics relevant to the MCAGCC population including heat safety, cancer prevention, stroke and hypertension prevention, back to school issues and even tattoo safety and removal.

The hospital's Public Affairs Office reformatted the hospital's newspaper to increase circulation and become a tool for health promotions and health education. Hunt has established the monthly theme of the publication. This monthly theme is determined through a

multi-disciplinary collaboration of health care providers on the hospital's Health Promotions Steering Committee that Hunt chairs.

Last year the hospital converted the command's newsletter to a newspaper. Permission was obtained from the Commanding General of the Combat Center for an amendment to the base newspaper's publishing agreement with a civilian enterprise publisher to include "The Examiner" in that agreement. This action saves the hospital more than \$20,000 per year, and provides an increase in circulation of the newspaper from 700 copies per month, which were distributed within the hospital, to more than 8,000 copies currently being delivered to beneficiaries' homes. All of this is at no cost to the government or the Robert E. Bush Naval Hospital.

The 'theme of the month' health promotions Examiner articles also match the health promotions display in the clinic waiting areas. The displays offer pamphlets and other education materials that complement the monthly theme. The displays also include a steady supply of routine health education materials on topics such as tobacco cessation and stress reduction.

A few years ago, the Robert E. Bush Naval Hospital negotiated with the local cable TV Company to provide a closed circuit cable channel at no cost, so the hospital could provide its patients with a health promotion channel on the waiting area televisions. The command then obtained a six-deck video insertion system, along with the appropriate computer software to facilitate automatic television programming through the Public Affairs Office.

Therefore, in addition to all of her print products, Hunt also provides select health and safety videos to program into the hospital's closed circuit cable television station, this benefits patients waiting to see a provider. "These videos are only 10 to 15 minutes long and are good sources of health or safety information for our patients," said Hunt. "They are just long enough for our patients to get some good information before they are seen by their provider," added Hunt.

In keeping with ever changing technology and to tie all of her health promotions programs together, Hunt developed a Health Promotions Web page that is included on the hospital's main web site. The web site offers information on Men's health, critter safety, sports injury prevention, HIV and STD education, CyberSafety and tobacco cessation, to name just a few of the topics and links offered. The use of the web site makes information available to beneficiaries in the privacy of their own home. It also saves the command money, due to a reduction in printing expenses and purchasing of printed education materials.

Since her arrival, Hunt has become a valuable staff member of the Robert E. Bush Naval Hospital. Other staff members, patients and civilian and military treatment facilities seek out her advice and resources.

Kick the habit and learn to become tobacco free!

The Robert E. Bush Naval Hospital Health Promotions Program offers tobacco cessation classes in the hospital.

Classes are offered at two convenient times of noon and 5:30 p.m.

To sign up, call Health Promotions at 830-2814.

The next set of tobacco cessation classes will start Feb. 11. Call now before it all goes up in smoke!

More Hard Chargers...



Above, DT2 Brian Benedict, Military Personnel, receives Special Region 9 Recognition from Capt. Salmond.



Above, HM2 Juan Johnson is frocked to Petty Officer 1st Class by Capt. Salmond.

Right, Lt. Cmdr. Susan Tussey, Family Practice, receives Special Region 9 Recognition from Capt. Salmond.

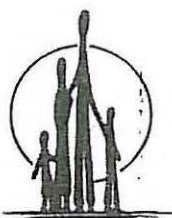


Right, MSC Gregorio Gonzales, BEQ Staff, receives a Navy and Marine Corps Achievement Medal from Capt. Salmond.



Judy Moore
Yucca Valley resident
& Community Services Director
at Hi-Desert Medical Center's
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